

EXPERT DECLARATION OF DYLAN GEE

I, Dylan G. Gee, hereby declare as follows:

1. I am an Assistant Professor of psychology at Yale University where I have been a faculty member since 2016. I earned my PhD in clinical psychology at the University of California, Los Angeles (UCLA) and completed a post-doctoral fellowship in developmental psychobiology at Weill Cornell Medical College. I earned my Bachelor's degree *summa cum laude* in Psychological & Brain Sciences at Dartmouth College. For over ten years I have conducted research on the developing brain as it relates to the impact of stress and psychiatric disorders in childhood.

2. My research examines the psychological and neurobiological consequences of childhood trauma, with a specific focus on early caregiving adversity, including parental deprivation. I have published over 40 peer-reviewed scientific articles and delivered scientific talks at the field's national and international society meetings, including the American College of Neuropsychopharmacology, American Psychological Association, Anxiety and Depression Association of America, Association for Behavioral and Cognitive Therapies, Association for Psychological Science, International Society for Developmental Psychobiology, Society for Neuroscience, and Society of Biological Psychiatry. My current teaching at Yale University includes a focus on developmental neuroscience and child and adolescent psychopathology.

3. Attached hereto as Exhibit A is my Curriculum Vitae, including a list of my scholarly publications.

4. My declaration is based on a review of the scientific literature and of the plaintiffs' fact summaries (JO, JP, and RM), in addition to the knowledge accumulated during my education and career as described above. I provide this declaration based on my review of the fact summaries and knowledge as a psychologist who specializes in trauma. The full citations for the works cited in my declaration are attached hereto as Exhibit B.

1 5. Forcible separation of children from their parents is known to be a
2 traumatic event that confers risk for both immediate and long-term psychological harm
3 for both children and parents. The immediate psychological consequences of exposure
4 to traumatic events involving caregivers include, but are not limited to, anxiety, distress,
5 despair, and terror for both the child and the parent. Among children, the long-term
6 consequences of forced separation from a parent may include, but are not limited to,
7 psychiatric disorders including posttraumatic stress disorder, anxiety disorders, major
8 depression, attention-deficit/hyperactivity disorder, substance use disorders, and
9 conduct problems (e.g., Zeanah et al., 2009; Bos et al., 2011) and problems with
10 physical growth (e.g., Smyke et al., 2007; Loman, Wiik, Frenn, Pollak, & Gunnar,
11 2009), cognitive functioning (e.g., Loman et al., 2009; Fox, Almas, Degnan, Nelson, &
12 Zeanah, 2011), language development (e.g., Loman et al., 2009), executive functioning
13 (e.g., Bos, Fox, Zeanah, & Nelson, 2009; McDermott, Westerlund, Zeanah, Nelson, &
14 Fox, 2012), attachment (e.g., Lieberman, 2004; Zeanah, Smyke, Koga, Carlson, &
15 Bucharest Early Intervention Project Core Group, 2005), emotion regulation (e.g.,
16 Tottenham et al., 2010; Burkholder, Koss, Hostinar, Johnson, & Gunnar, 2016), and
17 social functioning (e.g., Gleason et al., 2014; Lawler, Hostinar, Mliner, & Gunnar,
18 2014).

19 6. Forcible family separation can also have devastating psychological and
20 neurobiological consequences for parents. The traumatic nature of separation from the
21 child is likely to be exacerbated when parents are not provided with information about
22 their child's location or condition, or when parents do not have access to information in
23 their native language (Kirmayer et al., 2011). In adults, psychological trauma is
24 associated with elevated risk for psychiatric disorders including post-traumatic stress
25 disorder (Breslau et al., 1998) and can induce physiological changes, including but not
26 limited to dysregulated stress responding, amygdala hyperactivity, and deficits in
27 prefrontal cortex control of the amygdala, which are associated with difficulty
28 regulating fear (Rauch, Shin, & Phelps, 2006). Evidence suggests that individuals
seeking asylum are particularly vulnerable to psychological distress, and levels of

1 depression, anxiety, and posttraumatic stress disorder symptomatology are elevated
2 when asylum seekers are detained (Robjant, Robbins, & Senior, 2009).

3 7. Children and parents seeking asylum are likely to be especially vulnerable
4 to the immediate and long-term risks associated with forcible separation (Bronstein &
5 Montgomery, 2011; Fortuna et al., 2016). Individuals exposed to multiple traumas are
6 at heightened risk for psychiatric disorders including posttraumatic stress disorder, and
7 adverse health outcomes (Felitti et al., 1998; Chapman et al., 2004; Cloitre et al., 2009;
8 Kolassa et al., 2010). In cases of children and parents who have already experienced
9 trauma or adversity (e.g., through adverse conditions in their country of origin or en
10 route to the U.S.), forcible family separation further compounds their risk for mental
11 health problems. The risks for psychological consequences may be exacerbated by the
12 stress and uncertainty associated with immigration and when children or parents are
13 placed in institutional settings such as detention centers (MacLean, 2003; Nelson, 2007;
14 Bronstein & Montgomery, 2011; Young & Gordon, 2016).

15 8. Forcible separation of children from their parents also carries risk for
16 physiological and neurobiological changes that predispose individuals to mental and
17 physical health problems. Children who were separated from their caregivers and
18 initially reared in institutionalized care often show long-term physiological
19 consequences of early parental deprivation, including alterations of the hypothalamic-
20 pituitary-adrenal axis system (Fries, Shirtcliff, & Pollak, 2008; Gunnar, Frenn,
21 Wewerka, & Ryzin, 2009; Koss, Mliner, Donzella, & Gunnar, 2016) and alterations in
22 brain structure and function (Sheridan et al., 2012; Gee et al., 2013; McLaughlin et al.,
23 2014; Hodel et al., 2015; Bick et al., 2015). These children exhibit reduced gray matter
24 and white matter volumes in the brain (Bick et al., 2015; McLaughlin et al., 2014).
25 Neural circuitry related to stress and threat responding appears to be especially
26 influenced, with evidence of larger amygdala size and amygdala hyperactivity, which
27 are associated with heightened anxiety (Tottenham et al., 2010, 2011; Gee et al., 2013).
28 Children who experienced early separation from their parents can continue to exhibit

1 psychological and neurobiological consequences years following the trauma (Zeanah et
2 al., 2009; McLaughlin et al., 2014).

3 9. Caregivers serve as a fundamental regulator for children early in life
4 (Hofer, 1994). Caregivers are essential for buffering against stress, as evidenced by
5 studies showing that caregivers regulate the child's hypothalamic-pituitary-adrenal axis
6 (Gunnar & Donzella, 2002) and amygdala reactivity (Gee et al., 2014). Thus, forcible
7 separation of children from their parents also takes away the person who is likely to be
8 the child's most important buffer against stress during a critical time of need, given the
9 stressful conditions in detention centers for children. Particularly when forcible
10 separation occurs early in life, this trauma can reprogram the child's biology in ways
11 that lead to a dysregulated hypothalamic-pituitary-adrenal axis system and difficulty
12 regulating stress and adapting to psychological challenges both immediately and later
13 in life, with these consequences often persisting into adulthood (Pesonen et al., 2010;
14 Koss, Hostinar, Donzella, & Gunnar, 2014; Kumari, Head, Bartley, Stansfeld, &
15 Kivimaki, 2013; Kumsta et al., 2017).

16 10. Despite the potential for long-term psychological and neurobiological
17 consequences of forcible separation, evidence also suggests the potential for
18 intervention to reduce the negative impact of early parental deprivation (Nelson et al.,
19 2007; Fox et al., 2011; Sheridan, Fox, Zeanah, McLaughlin, & Nelson, 2012; Bick et
20 al., 2015). A number of evidence-based treatments for childhood trauma exist, including
21 trauma-focused cognitive behavioral therapy, child parent psychotherapy, parent-child
22 interaction therapy for traumatized children, and cognitive behavioral intervention for
23 trauma in schools, which have been shown to reduce symptoms of PTSD and other
24 psychiatric disorders (e.g., Cohen, Mannarino, Berliner, & Deblinger, 2000; Lieberman,
25 Ippen, & Van Horn, 2006; Lieberman, Van Horn, & Ippen, 2005; Cicchetti, Rogosch,
26 & Toth, 2006; Dozier, Peloso, Lewis, Laurenceau, & Levine, 2008). Evidence suggests
27 that many evidence-based treatments are effective across various cultural backgrounds.
28 Some evidence-based treatments have been specifically adapted for immigrant
populations, and others are effective without significant adaptation beyond language

1 (Kataoka et al., 2003; Ngo et al., 2008; McCabe & Yeh, 2009; Costantino, Primavera,
2 Malgady, & Costantino, 2014). Longer durations of trauma exposure are consistently
3 associated with poorer outcomes (e.g., O'Connor & Rutter, 2000; Loman et al., 2009),
4 highlighting the importance of reunification and treatment at the earliest possible stage.

5 11. Interventions following forcible separation are likely to be maximally
6 effective if they provide treatment in the context of the family or parent/child dyad. The
7 importance of treating parent/child dyads following traumatic exposures involving both
8 parents and children (i.e., forcible separation of immigrant children from their parents)
9 is evidenced by randomized trials demonstrating the value of a relationship-based
10 model for treating children who have experienced caregiver-related trauma (Toth,
11 Maughan, Manly, Spagnola, & Cicchetti, 2002; Lieberman, Van Horn, & Ippen, 2005),
12 as well as children experiencing anxious attachment (Lieberman, Weston, & Pawl,
13 1991). Children look to caregivers for information about safety and danger, particularly
14 in early childhood, and young children are reliant on their caregivers to communicate
15 information about the world (Ainsworth, 1969; Bowlby, 1969). Given the central role
16 that parents play in children's emotional lives, it is imperative that children's responses
17 to traumatic events are treated within the context of this ongoing, central relationship
18 (Fraiberg, 1980).

19 12. Treating the parent and child together allows for a clinician to support both
20 parties involved in the attachment relationship in order to promote the health of the
21 parent and child simultaneously. Broad evidence has shown that children's reactions to
22 trauma are influenced by risk and protective factors that often involve their caregivers
23 (Cicchetti & Lynch, 1993; Sameroff, 1995; Gewirtz, Forgatch, & Wieling, 2008).
24 Directly targeting certain features of parents' behavior in treatment may support
25 children's improvement (e.g., Levendosky, Huth-Bocks, Shapiro, & Semel, 2003). Due
26 to the dyadic nature of trauma exposure in cases of forcible separation, children's
27 behaviors and responses to traumatic reminders may trigger parents' own trauma-
28 related symptoms, which can affect the security of the parent-child attachment
relationship (Main & Hesse, 1990; Scheeringa & Zeanah, 1995; Pynoos, Steinberg, &

1 Piacentini, 1999). Treatment in the family context allows the clinician to address a
2 complex trauma history encompassing both the child's and parent's experiences.

3 13. It is essential that mental health interventions for children and parents who
4 experienced forcible separation be provided in an environment that does not cause
5 further harm and allows for therapeutic efficacy. The deleterious effects of detention on
6 both children (Lorek et al., 2009; Dudley, Steel, Mares, & Newman, 2012; Deans et al.,
7 2013; Kronick, Rousseau, & Cleveland, 2015) and adults (Physicians for Human
8 Rights, 2003; Robjant, Robbins, & Senior, 2009; Deans et al., 2013) have been well-
9 documented (Linton, Griffin, Shapiro, 2017). Reports of mental health problems
10 associated with immigration detention include high rates of posttraumatic stress
11 disorder, anxiety, depression, suicidal ideation, and behavioral problems (Physicians
12 for Human Rights, 2003; Robjant et al., 2009; Coffey, Kaplan, Sampson, & Tucci,
13 2010). Detention can also undermine parents' ability to effectively provide for their
14 children's needs, both instrumentally and emotionally. Treatment provided outside of
15 detention will have a higher likelihood of effectively reducing trauma-related symptoms
16 for both children and parents.

17 14. In the case of JO, JO was forcibly separated from her 15-year-old daughter
18 TB. Given the psychological trauma and risk for ongoing long-term consequences
19 associated with forcible separation, it is my opinion that JO and TB should be reunited
20 immediately, released from detention, and provided with mental health assessment and
21 treatment as needed to remediate any harm sustained and allow for healing to begin. JO
22 and TB should both receive mental health assessment and evidence-based
23 psychotherapy supported by research for its effectiveness in addressing trauma-related
24 symptoms, provided in their native language and a culturally competent context. Given
25 the trauma related to parent/child separation, treatment in the context of the family or
26 parent/child dyad is likely to be particularly effective for JO and TB. TB would likely
27 benefit from trauma-informed treatment, such as trauma-focused cognitive behavioral
28 therapy, provided by a clinician specializing in child and adolescent trauma. It is notable
that both JO and TB have been exposed to prior trauma (e.g., threats from gangs in their

1 country of origin), increasing their likelihood of developing posttraumatic stress
2 disorder or other psychiatric disorders and the need for urgent reunification and
3 psychological services. To the extent that mental health screening suggests that JO and
4 TB are suffering from trauma-related symptoms, treatment should be provided outside
5 of detention in a setting that does not further exacerbate their exposure to trauma.

6 15. In the case of JP, JP was forcibly separated from her 16-year-old daughter
7 LP, including a period of over one month with no contact or knowledge of each other's
8 whereabouts. JP speaks a Mayan dialect and understands very little Spanish and no
9 English. She cannot read or write. JP's trauma was likely further exacerbated by lack
10 of communication, including the experience of guards who did not communicate
11 supportively when she did not understand. Given the psychological trauma and risk for
12 ongoing long-term consequences associated with forcible separation, it is my opinion
13 that JP and LP should be reunited immediately, released from detention, and provided
14 with mental health assessment and treatment as needed to remediate any harm sustained
15 and allow for healing to begin. JP and LP should both receive mental health assessment
16 and evidence-based psychotherapy supported by research for its effectiveness in
17 addressing trauma-related symptoms, provided in their native language and in a
18 culturally competent context. Given the trauma related to parent/child separation,
19 treatment in the context of the family or parent/child dyad is likely to be particularly
20 effective for JP and LP. LP would likely benefit from trauma-informed treatment, such
21 as trauma-focused cognitive behavioral therapy, provided by a clinician specializing in
22 child and adolescent trauma. To the extent that mental health screening suggests that JP
23 and LP are suffering from trauma-related symptoms, treatment should be provided
24 outside of detention in a setting that does not further exacerbate their exposure to
25 trauma.

26 16. In the case of RM, RM and her daughter SQ were forcibly separated and
27 have had no contact since separation. Given the psychological trauma and risk for
28 ongoing long-term consequences associated with forcible separation, it is my opinion
that RM and SQ should be reunited immediately, released from detention, and provided

1 with mental health assessment and treatment as needed to remediate any harm sustained
2 and allow for healing to begin. RM and SQ should both receive mental health
3 assessment and evidence-based psychotherapy supported by research for its
4 effectiveness in addressing trauma-related symptoms, provided in their native language
5 and in a culturally competent context. Given the trauma related to parent/child
6 separation, treatment in the context of the family or parent/child dyad is likely to be
7 particularly effective for RM and SQ. SQ would likely benefit from trauma-informed
8 treatment provided by a clinician specialized in working with children and adolescents.
9 It is notable that RM and SQ expressed fear of returning to their country of origin. The
10 likely experience of additional traumas prior to the forcible separation would increase
11 their likelihood of developing posttraumatic stress disorder or other psychiatric
12 disorders and the need for urgent reunification and psychological services. To the extent
13 that mental health screening suggests that RM and SQ are suffering from trauma-related
14 symptoms, treatment should be provided outside of detention in a setting that does not
15 further exacerbate their exposure to trauma.

16 17. In summary, based on extensive research and my own involvement with
17 research and psychological services for children and their families who have
18 experienced caregiver-related trauma, it is my opinion that children and parents who
19 were forcibly separated should be reunited as quickly as possible, released from
20 detention, and provided with immediate mental health evaluation and opportunities for
21 further treatment in order to mitigate any harm already sustained, prevent further
22 damage, and reduce the risk of long-term psychological and neurobiological
23 impairment to both the children and their parents. The plaintiffs and all similarly
24 situated parents and children should receive mental health assessment to evaluate
25 current mental health status and risk for trauma-related symptoms. Any parent or child
26 found to display current symptoms or risk of trauma-related psychopathology should be
27 offered further treatment. Following reunification, both children and parents require
28 immediate, intensive clinical intervention to support healing following trauma
exposure. If for any reason a parent and child remain separated beyond the proposed

1 timeline, they should each be screened immediately for mental health status and risk of
2 trauma-related symptoms and offered relevant treatment even prior to reunification. If
3 a parent is deported without their child, the child should be immediately screened and
4 provided with appropriate intervention.

5 18. Although forcible family separation and detention can have widespread
6 and devastating long-term consequences for psychological and neurobiological
7 functioning, evidence suggests that appropriately delivered interventions can be
8 effective in mitigating this damage. All mental health assessment and treatment
9 provided to the plaintiffs and all similarly situated parents and children should be
10 delivered in a culturally competent and linguistically sensitive manner and by mental
11 health clinicians trained in evidence-based trauma-informed interventions. It is essential
12 that treatment takes place in a context that does not further exacerbate harm or exposure
13 to trauma; thus, it should be provided outside of detention. Given the nature of the
14 trauma experienced by the plaintiffs and all similarly situated parents and children,
15 therapy that takes place in a family context is likely to be most effective in mitigating
16 harm sustained by children and parents who were forcibly separated.

17 I declare under penalty of perjury under the laws of the United States that the
18 foregoing is true and correct.

19 Executed on July 8, 2018, at New Haven, CT

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23 Dylan G. Gee
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Exhibit A

DYLAN GRACE GEE, Ph.D.

ACADEMIC APPOINTMENTS

Yale University , New Haven, CT Assistant Professor, Department of Psychology	July 2016 – present
Weill Cornell Medical College , New York, NY Assistant Professor, Sackler Institute for Developmental Psychobiology, Department of Psychiatry	Sept 2015 – June 2016

EDUCATION

Weill Cornell Medical College , New York, NY Postdoctoral Fellow, Sackler Institute for Developmental Psychobiology	July 2015 – Aug 2015
New York Presbyterian Hospital/Weill Cornell Medical College , New York, NY Clinical Psychology Predoctoral Internship	2014 – 2015
University of California, Los Angeles , Los Angeles, CA Ph.D. in Psychology, June 2015 M.A. in Psychology, December 2010 Major: Clinical Psychology; Minor: Behavioral Neuroscience	2009 – 2015
Dartmouth College , Hanover, NH B.A., Psychological and Brain Sciences, <i>summa cum laude</i>	2003 – 2007

HONORS AND AWARDS

Association for Psychological Science Rising Star Award	2017
World Economic Forum Young Scientist	2016
NIH Director's Early Independence Award	2015
NARSAD Young Investigator Award	2015
Payne Whitney Faculty Council Award for Outstanding Research, Weill Cornell Medical College	2015
Anxiety and Depression Association of America (ADAA) Career Development Leadership Fellow	2015
Samuel W. Perry III, M.D., Distinguished Award in Psychiatric Medicine, Weill Cornell Medical College	2015
APA Graduate Students and Early Career Psychologists Research Award, 1 st Place	2014
Michael J. Goldstein Distinguished Dissertation Award, Honorable Mention	2014
National Psychologist Trainee Register Credentialing Scholarship	2014
UCLA Mautner Graduate Award	2013
Society for a Science of Clinical Psychology Dissertation Award	2012
APA Anne Anastasi Award for outstanding graduate student researcher	2012
Stanley Sue Distinguished Research Award, UCLA	2011
Graduate Research Mentorship Award, UCLA	2010-2011
Graduate Summer Research Mentorship Award, UCLA	2010
Edwin W. Pauley Fellowship, UCLA	2009-2010
University Distinguished Fellowship, UCLA	2009-2010
<i>Specialized Training Fellowships and Travel Awards</i>	
American College of Neuropsychopharmacology (ACNP) Travel Award	2016
Anxiety and Depression Association of America (ADAA) Career Development Travel Award	2015
Society for Neuroscience Chapter Travel Award	2014
Sackler Summer Institute in Developmental Psychobiology (Weill Cornell Medical College)	2013
American Psychological Foundation Ungerleider/Zimbardo Travel Scholarship	2013, 2014

UCLA Brain Research Institute/Semel Institute Travel Award	2011, 2012, 2013
NIMH Summer Institute in Cognitive Neuroscience (UCSB)	2011
NeuroImaging Training Program (NITP) summer fellowship (UCLA)	2010

Undergraduate

Phi Beta Kappa Society	2007
Rufus Choate Scholar (top 5% of undergraduate class)	2005-2007
Benjamin G. Benner Award for Excellence in Research	2007
Highest honors awarded for undergraduate thesis	2007
Green Key Society (honorary service organization for juniors)	2005-2006
Dartmouth College Leadership Discovery Program	2003

RESEARCH FUNDING

NIH Director's Early Independence Award (DP5OD021370) <i>Novel Mechanisms of Fear Reduction Targeting the Biological State of the Developing Brain</i>	2015-2020
NARSAD Young Investigator Award (Brain and Behavior Research Foundation) <i>Novel Mechanisms of Fear Reduction Targeting the Biological State of the Developing Brain</i>	2016-2018
APF Elizabeth Munsterberg Koppitz Child Psychology Graduate Fellowship <i>Amygdala-Prefrontal Brain Connectivity in Typically Developing Children and Adolescents and Following Early-Life Stress</i>	2013-2014
APF/COGDOP Harry and Miriam Levinson Scholarship <i>Amygdala-Prefrontal Brain Connectivity in Typically Developing Children and Adolescents and Following Early-Life Stress</i>	2013-2014
APA Dissertation Research Award Grant <i>Amygdala-Prefrontal Function and Clinical Course among Adolescents and Young Adults at Clinical High Risk for Psychosis</i>	2012-2013
NSF Graduate Research Fellowship Award <i>Development of Emotion Regulation Networks from Adolescence through Young Adulthood</i>	2010-2013
APAGS Basic Psychological Science Research Grant <i>Development of Emotion Regulation Networks from Adolescence through Young Adulthood</i>	2009-2010

PUBLICATIONS

Lebowitz, E.R., **Gee, D.G.**, Pine, D.S., Silverman, W.K. (In press). Implications of the Research Domain Criteria Project for Childhood Anxiety and its Disorders. *Clinical Psychology Review*.

Cao, H., McEwen, S.C., Forsyth, J.K., **Gee, D.G.**, Bearden, C.E., Addington, J., Goodyear, B., Cadenhead, K.S., Mirzakhani, H., Cornblatt, B.A., Carrion, R.A., Mathalon, D.H., McGlashan, T.H., Perkins, D.O., Belger, A., Seidman, L.J., Thermenos, H., Tsuang, M.T., van Erp, T.G.M., Walker, E.F., Hamann, S., Anticevic, A., Woods, S.W., Cannon, T.D. (In press). Toward leveraging human connectomic data in large consortia: Generalizability of fMRI-based brain graphs across sites, sessions, and paradigms. *Cerebral Cortex*.

Tanovic, E., **Gee, D.G.**, Joormann, J. (In press). Intolerance of Uncertainty: Neural and Psychophysiological Correlates of the Perception of Uncertainty as Threatening. *Clinical Psychology Review*.

Casey, B.J., Heller, A.S., **Gee, D.G.**, & Cohen, A.O. (In press). Development of the Emotional Brain. *Neuroscience Letters*.

- Cannon, T.D., Cao, H., Mathalon, D.H., **Gee, D.G.**, on behalf of the NAPLS consortium. (2018). Multisite reliability of fMRI measures of brain activation during an emotion processing task: Clarification and implications for statistical power. *Human Brain Mapping*, 39(1), 599-601.
- Meyer, H.C., Lee, F.S., **Gee, D.G.** (2018). The role of genetic variation and the endocannabinoid system in adolescent brain development. *Neuropsychopharmacology*, 43(1), 21-33.
- Cohodes, E.M., & **Gee, D.G.** (2017). Developmental neurobiology of anxiety and related disorders. *Oxford Research Encyclopedia of Neuroscience*.
- Fareri, D.S., Gabard-Durnam, L., Goff, B., Flannery, J., **Gee, D.G.**, Lumian, D.S., Caldera, C., Tottenham, N. (2017). Altered ventral striatal-medial prefrontal cortex resting-state connectivity mediates adolescent social problems after early institutional care. *Development and Psychopathology*, 29(5), 1965-1876.
- Flannery, J., Gabard-Durnam, L., Shapiro, M., Goff, B., Caldera, C., Louie, J., **Gee, D.G.**, Telzer, E., Humphreys, K., Lumian, D., Tottenham, N. (2017). Diurnal cortisol and early institutional care – Age matters. *Developmental Cognitive Neuroscience*, 25, 160-166.
- Silvers, J.A., Goff, B., Gabard-Durnam, L.J., **Gee, D.G.**, Fareri, D.S., Caldera, C., Tottenham, N. (2017). Vigilance, the amygdala, and anxiety in youth with a history of institutional care. *Biological Psychiatry: Cognitive Neuroscience and Neuroimaging*, 2(6), 493-501.
- Aldao, A., **Gee, D.G.**, De Los Reyes, A., Seager, I. (2016). Emotion dysregulation as a transdiagnostic vulnerability to psychopathology: Current and future directions. *Development and Psychopathology*, 28, 927-946.
- Gee, D.G.** (2016). Sensitive periods of emotion regulation: Influences of parental care on frontoamygdala circuitry and plasticity. *New Directions for Child and Adolescent Development*, 153, 87-110.
- Silvers, J.A., Lumian, D.S., Gabard-Durnam, L., **Gee, D.G.**, Goff, B., Fareri, D.S., Caldera, C., Flannery, J., Telzer, E., Humphreys, K., Tottenham, N. (2016). Early parental deprivation alters development of amygdala-hippocampal-prefrontal circuitry involved in fear learning. *Journal of Neuroscience*, 36(24), 6420-30.
- Green, S.A., Goff, B., **Gee, D.G.**, Gabard-Durnam, L., Flannery, J., Telzer, E., Humphreys, K., Louie, J., Tottenham, N. (2016). Discrimination of amygdala response predicts future separation anxiety in youth with early deprivation. *Journal of Child Psychology and Psychiatry*, 57(10), 1135-44.
- Gabard-Durnam*, L., **Gee*, D.G.**, Goff, B., Flannery, J., Telzer, E.H., Humphreys, K.L., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2016). Stimulus-elicited connectivity influences resting-state connectivity years later in human development: a prospective study. *Journal of Neuroscience*, 36(17), 4771-84.
- Gee*, D.G.**, Fetcho*, R., Jing*, D. Li*, A., Glatt, C.E., Drysdale, A.T., Cohen, A.O., Dellarco, D.V., Yang, R., Dale, A.M., Jernigan, T.L., Lee, F.S., Casey, B.J., and the PING Consortium. (2016). Individual differences in frontolimbic circuitry and anxiety emerge with adolescent changes in endocannabinoid signaling across species. *Proceedings of the National Academy of Sciences of the United States of America*, 113(16), 4500-5.
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- Fareri, D.S., Gabard-Durnam, L., Goff, B., Flannery, J., **Gee, D.G.**, Lumian, D.S., Caldera, C.J., Tottenham, N. (2015). Normative development of ventral striatal resting-state connectivity in humans. *NeuroImage*, 118, 422-37.

- Gee, D.G.** & Casey, B.J. (2015). The impact of developmental timing for stress and recovery. *Neurobiology of Stress*, 1, 184-194.
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- Gee, D.G.**, Karlsgodt, K.H., van Erp, T.G.M., Bearden, C.E., Lieberman, M.D., Belger, A., Perkins, D., Olvet, D., Cornblatt, B., Constable, T., Woods, S., Addington, J., Cadenhead, K., McGlashan, T., Seidman, L., Tsuang, M., Walker, E., Cannon, T.D. (2012). Altered age-related trajectories of amygdala-prefrontal circuitry in adolescents at risk for psychosis: A Preliminary Study. *Schizophrenia Research*, 134, 1-9.
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Stark, D.E., Margulies, D.S., Shehzad, Z., Reiss, P.T., Kelly, A.M.C., Uddin, L.Q., **Gee, D.G.**, Roy, A.K., Banich, M.T., Castellanos, F.X., Milham, M.P. (2008). Regional variation in interhemispheric coordination of intrinsic hemodynamic fluctuations. *Journal of Neuroscience*, 28(51), 13754-64.

BOOK CHAPTERS

Cohodes, E.M., & **Gee, D.G.** (In press). Etiological factors: Basic neuroscience. In H. Kristensen, M. Villabo, S. Compton (Eds.), *Pediatric Anxiety Disorders*.

Gee, D.G., & Casey, B.J. (2017). Neuroimaging and the Neuroanatomical Circuits Implicated in Anxiety, Fear, and Stress-related Disorders. In B.J. Sadock, V.A. Sadock, P. Ruiz (Eds.), *Kaplan & Sadock's Comprehensive Textbook of Psychiatry, Tenth Edition*.

Gee, D.G., & Whalen, P.J. (2014). The Amygdala: Relations to Biologically Relevant Learning and Development. In M.S. Gazzaniga (Ed.), *The Cognitive Neurosciences, 5th Edition*.

Jimenez, A.M., **Gee, D.G.**, Cannon, T.D., Lieberman, M.D. (2013). The Social Cognitive Brain: A Review of Key Individual Difference Parameters with Relevance to Schizophrenia. In D. Roberts and D. Penn (Eds.). *Social Cognition in Schizophrenia: From Evidence to Treatment*.

INVITED TALKS & SYMPOSIA

- Gee, D.G.,** Odriozola, P., Pruessner, L., Cohodes, E., Caballero, C., Spencer, H. (2018, November). *Novel mechanisms of fear reduction targeting the biological state of the developing brain*. Oral presentation at Association for Behavioral and Cognitive Therapies annual meeting, Washington, DC.
- Gee, D.G.,** Cohodes, E.M., Odriozola, P., Mandell, J.D., Smith, M., Caballero, C., Rogers, H., Haberman, J.T., Hartley, C.A. (2018, October). *Mechanisms of stressor controllability following early-life trauma in humans*. Oral presentation at International Society for Developmental Psychobiology annual meeting, San Diego, CA.
- Gee, D.G.** (2018, October). *Sensitive Periods of Frontoamygdala Development and Risk for Anxiety Disorders*. Oral presentation at American Academy of Child and Adolescent Psychiatry annual meeting, Seattle, WA.
- Gee, D.G.** (2018, September). *Childhood anxiety regulation: The Role of parents in buffering frontoamygdala circuitry*. Oral presentation at Society for Research in Psychopathology annual meeting, Indianapolis, IN.
- Gee, D.G.,** Odriozola, P., Pruessner, L., Haberman, J., Cohodes, E., Caballero, C. (2018, May). *Novel mechanisms of fear reduction targeting the biological state of the developing brain*. Oral presentation at Society of Biological Psychiatry annual meeting, New York, NY.
- Gee, D.G.,** Odriozola, P., Pruessner, L., Haberman, J., Cohodes, E. (2018, April). *Dynamic changes in frontolimbic interactions and safety learning across development*. Oral presentation at ADAA annual meeting, Washington, DC.
- Gee, D.G.** (2018, March). *Parental Influences on Frontoamygdala Circuitry and Emotional Development*. Invited talk at the Parenting and Family Dynamics Pre-conference at the SPSP annual convention, Atlanta, GA.
- Gee, D.G.** (2017, December). *Sensitive Periods of Frontoamygdala Development and Risk for Anxiety Disorders*. Invited talk at New York University.
- Gee, D.G.** (2017, December). *Sensitive periods of frontoamygdala development and risk for anxiety disorders*. Oral presentation (panel) at American College of Neuropsychopharmacology, Palm Springs, CA.
- Gee, D.G.** (2017, November). *Sensitive Periods of Neural Development and Risk for Anxiety Disorders*. Invited talk at the University of Massachusetts, Amherst.
- Gee, D.G.,** Goff, B., Gabard-Durnam, L., Caldera, C., Fareri, D.S., Lumian, D.S., Flannery, J., Tottenham, N. (2017, November). *Experimental manipulation of prefrontal cortex differentially affects amygdala reactivity following parental deprivation*. Oral presentation at International Society for Developmental Psychobiology, Washington, D.C.
- Gee, D.G.** (2017, October). *How understanding the development of the emotional brain in social context can lead to targeted intervention strategies and promotion of resilience in the face of adversity*. Invited panel at the Developmental Affective Neuroscience Symposium, University of Pittsburgh.
- Gee, D.G.** (2017, May). *Sensitive Periods of Neural Development and Risk for Anxiety Disorders*. Invited talk at the Association for Psychological Science annual meeting, Boston, MA.
- Gee, D.G.** (2017, May). *Sensitive Periods of Neural Development and Risk for Anxiety Disorders*. Invited talk at Yale Child Study Center Grand Rounds.
- Gee, D.G.** (2017, May). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Anxiety Disorders*. Invited talk at Dartmouth College.
- Gee, D.G.** (2017, April). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Anxiety Disorders*. Invited talk at Sackler Institute for Developmental Psychobiology, Weill Cornell Medicine.

- Gee, D.G.** (2017, March). *The Emotional Brain in Children and Adolescents*. Keynote address at Yale University Brain Education Day.
- Gee, D.G.** (2017, March). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Anxiety*. Invited talk at Brown University.
- Gee, D.G.** (2017, February). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Anxiety Disorders*. Invited talk at the Yale Magnetic Resonance Research Center.
- Gee, D.G.** (2017, February). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Anxiety Disorders*. Invited talk at the VA National Center for PTSD, West Haven, CT.
- Gee, D.G.** (2017, January). *Neurobiology of Maternal Attachment*. Invited talk at the American Museum of Natural History.
- Gee, D.G.,** Fareri, D.S., Gabard-Durnam, L., Caldera, C., Goff, B., Monti, M., Jovanovic, T., Casey, B.J., Tottenham, N. (2016, October). *Dynamic changes in safety learning and hippocampal-frontoamygdala interactions to reduce fear during adolescence*. Oral presentation at Association for Behavioral and Cognitive Therapies, New York, NY.
- Gee, D.G.,** Caglar, L.R., Mills-Finnerty, C., Goff, B., Gabard-Durnam, L., Fareri, D., Caldera, C., Lumian, D., Flannery, J., Hanson, C., Hanson, S.J., Tottenham, N. (2016, September). *Novel fMRI Approaches Reveal Developmental Changes in Frontoamygdala Circuitry with Implications for the Emergence of Psychiatric Disorders during Development*. Oral presentation at Society for Research in Psychopathology, Baltimore, MD.
- Gee, D.G.** (2016, April). *Sensitive Periods of Frontolimbic Circuitry Development and Risk for Anxiety*. Invited talk at Yale University Biological Sciences Training Program.
- Gee, D.G.** (2016, March). *Sensitive Periods of Neural Development and Risk for Psychopathology*. Invited talk at the Center for Autism and the Developing Brain, Weill Cornell Medical College.
- Gee, D.G.** (2015, September). *Effects of Parental Buffering on Emotion Regulation Circuitry and Function*. Invited talk at Infant Psychiatry Seminar, Weill Cornell Medical College.
- Gee, D.G.,** Fareri, D., Caldera, C., Goff, B., Gabard-Durnam, L., Monti, M., Jovanovic, T., Casey, B.J., Tottenham, N. (2015, September). *Safety signal learning as a novel mechanism for fear reduction during development*. Oral presentation at New York Social and Affective Neuroscience meeting, New York University, New York, NY.
- Gee, D.G.** (2015, June). *Sensitive Periods in Frontolimbic Circuitry Development and Risk for Psychopathology*. Invited talk at Weill Cornell Medical Center Psychiatry Grand Rounds.
- Gee, D.G.,** Gabard-Durnam, L., Flannery, J., Goff, B., Humphreys, K., Telzer, E.H., Hare, T.A., Bookheimer, S.Y., Tottenham, N. (2015, April). *Influences of Early Environmental Stressors on the Development of Anxiety and Emotion Regulation*. Oral presentation at Anxiety and Depression Association of America, Miami, FL.
- Gee, D.G.,** Goff, B., Gabard-Durnam, L., Flannery, J., Tottenham, N. (2015, April). *Developmental Timing of Normative Changes in Amygdala-Prefrontal Circuitry during Childhood and Adolescence*. Oral presentation at Anxiety and Depression Association of America, Miami, FL.
- Gee*, D.G.,** Gabard-Durnam*, L., Telzer, E.H., Humphreys, K.L., Goff, B., Shapiro, M., Flannery, J., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2015, April). *Parental buffering of human amygdala-prefrontal circuitry during childhood but not adolescence*. Invited talk at Social and Affective Neuroscience Society, Boston, MA.

- Gee, D.G.** (2015, March). *Neurodevelopmental Mechanisms of Social Regulation in Parent-Child Relationships*. Invited talk at Social Support TAT: Theory, Applications, and Technology meeting, Leiden, Netherlands.
- Gee, D.G.** (2015, January). *Sensitive Periods of Neural Development and Risk for Anxiety*. Keynote speaker at Advances in Understanding and Treating Neurodevelopmental Disorders Symposium, Mt. Sinai School of Medicine, Department of Psychiatry.
- Gee, D.G.** (2015, January). *Dynamic Pathways to Affective Psychopathology: A Clinical Developmental Neuroscience Approach*. Invited talk at Teachers College, Columbia University.
- Gee, D.G.** (2014, November). *Sensitive Periods of Neural Development and Risk for Anxiety*. Invited talk at Yale University.
- Gee, D.G.** (2014, November). *Amygdala-Prefrontal Circuitry Development and Risk for Stress-Related Disorders*. Invited talk at Weill Cornell Medical College Psychology Grand Rounds.
- Gee, D.G.** (2014, November). *Dynamic Pathways to Affective Psychopathology: A Clinical Developmental Neuroscience Approach*. Invited talk at Northwestern University.
- Gee, D.G.** (2014, August). *Development of Amygdala-Prefrontal Connectivity Following Early Life Stress*. Invited speaker at 1st International Conference on Human Brain Development, Beijing, China.
- Gee, D.G.** (2014, August). *Amygdala-Prefrontal Interactions in the Development of Psychopathology*. Invited speaker at “Rising Stars in Clinical Science” symposium, American Psychological Association, Washington, D.C.
- Gee, D.G., Tottenham, N.** (2014, March). *Amygdala-Prefrontal Connectivity and Normative Anxiety in Typical Development*. Oral presentation at “The Neurobiology of Early-Life Anxiety” symposium, Anxiety and Depression Association of America, Chicago, IL.
- Gee, D.G., Tottenham, N.** (2014, March). *Early Life Stress Accelerates the Development of Adult-Like Amygdala-Prefrontal Connectivity in Young Children*. Oral presentation at “The Effects of Prenatal and Postnatal Environment on Neurobiological Risk Factors during Development” symposium, Anxiety and Depression Association of America, Chicago, IL.
- Gee, D.G., Tottenham, N.** (2012, November). *Early Adversity Alters the Development of Amygdala-mPFC Circuitry and Anxiety*. Oral presentation at “Early-Life Stress and Behavioral Development” symposium, Society for Neuroscience, New Orleans, LA.
- Gee, D.G., Karlsgodt, K.H., Jimenez, A.M., Lesh, T.A., Kushan, L., Xu, A., Torre, J., van Erp, T.G.M., Lieberman, M.D., Bearden, C.E., Cannon, T.D.** (2010, November). *Altered Developmental Trajectories of Amygdala-Prefrontal Circuitry in Adolescents at Risk for Psychosis*. Oral presentation at “Subcortical-Prefrontal Interactions in Health and Disease” symposium, Society for Neuroscience, San Diego, CA.

CONFERENCE PRESENTATIONS (SELECTED)

- Odriozola, P., Pruessner, L., Haberman, J., Cohodes, E.M., Mandell, J.D., **Gee, D.G.** (2018, May). *Safety signal learning as a novel method of fear reduction in adolescents and young adults*. Poster presented at Social Affective Neuroscience Society, Brooklyn, NY.
- Gee, D.G., Fareri, D.S., Gabard-Durnam, L., Caldera, C., Goff, B., Monti, M., Jovanovic, T., Tottenham, N.** (2017, December). *Dynamic changes in safety learning and hippocampal-frontoamygdala interactions to reduce fear during adolescence*. Poster presented at American College of Neuropsychopharmacology, Palm Springs, CA.

- Gee, D.G.**, Goff, B., Gabard-Durnam, L., Caldera, C., Fareri, D.S., Lumian, D.S., Flannery, J., Tottenham, N. (2017, November). *Experimental manipulation of prefrontal cortex differentially affects amygdala reactivity following early-life stress*. Poster presented at Society for Neuroscience, Washington, D.C.
- Pruessner, L., Odriozola, P., Haberman, J., Cohodes, E.M., Silverman, M., Dellarco, D., **Gee, D.G.** (2017, November). *Safety signal learning: A Novel approach of targeting threat uncertainty in anxiety*. Poster presented at ABCT, San Diego, CA.
- Cohodes, E.M., Mandell, J.D., Rogers, E., Haberman, J.T., Odriozola, P., Hartley, C.A., **Gee, D.G.** (2017, October). *Neural mechanisms of stressor controllability across human development: A novel developmentally-informed paradigm*. Poster presented at Developmental Affective Neuroscience Symposium, Pittsburgh, PA.
- Odriozola, P., Pruessner, L., Haberman, J., Cohodes, E.M., **Gee, D.G.** (2017, September). *Safety signal learning as a novel method of fear reduction in adolescents and young adults*. Poster presented at Flux Congress, Portland, OR.
- Cohodes, E.M., Mandell, J.D., Rogers, E., Haberman, J.T., Odriozola, P., Hartley, C.A., **Gee, D.G.** (2017, September). *Mechanisms of stressor controllability: A novel developmentally-informed paradigm*. Poster presented at Flux Congress, Portland, OR.
- Gee, D.G.**, Hanson, C., Caglar, L.R., Fareri, D.S., Gabard-Durnam, L.J., Mills-Finnerty, C., Goff, B., Caldera, C.J., Lumian, D.S., Flannery, J., Hanson, S.J., Tottenham, N. (2017, August). *Experimental evidence for a developmental switch in human amygdala-prefrontal cortex communication*. Poster presented at Gordon Research Conference: Amygdala Function in Emotion, Cognition, & Disease, Stonehill, MA.
- Sodowick, L., Cohodes, E. M., **Gee, D. G.**, & Lieberman, A. F. (2017, May). *Prenatal substance exposure and prenatal violence victimization associated with offspring trauma exposure in early childhood*. Poster presented at Association for Psychological Science (APS), Boston, MA.
- Odriozola, P., Dajani, D.R., Burrows, C.A., Gabard-Durnam, L.J., **Gee, D.G.**, Tottenham, N., Uddin, L.Q. (2017, April). *Atypical development of amygdala functional connectivity in autism: a cross-sectional study*. Poster presented at SRCD, Austin, TX.
- Gee, D.G.**, Caglar, L.R., Mills-Finnerty, C., Goff, B., Gabard-Durnam, L., Fareri, D., Caldera, C., Lumian, D., Flannery, J., Hanson, C., Hanson, S.J., Tottenham, N. (2016, December). *Novel fMRI Approaches Reveal Developmental Changes in Frontoamygdala Circuitry with Implications for the Emergence of Psychiatric Disorders during Development*. Poster presented at American College of Neuropsychopharmacology, Hollywood, FL.
- Gabard-Durnam, L., Fareri, D., Goff, B., Flannery, **Gee, D.G.**, Caldera, C., Telzer, E., Humphreys, K., Shapiro, M., Tottenham, N. (2016, November). *Parental deprivation induced alterations in amygdala-cortical functional connectivity as risk and resilience factors for concurrent and long-term internalizing symptomatology*. Oral presentation at Society for Neuroscience, San Diego, CA.
- Odriozola, P., Dajani, D.R., Burrows, C.A., Gabard-Durnam, L.J., **Gee, D.G.**, Tottenham, N., Uddin, L.Q. (2016, September). *Atypical development of amygdala functional connectivity in autism: a cross-sectional study*. Poster presented at Flux International Congress, St. Louis, MO.
- Gee*, D.G.**, Fetcho*, R., Jing*, D. Li*, A., Glatt, C.E., Drysdale, A.T., Cohen, A.O., Dellarco, D.V., Yang, R., Dale, A.M., Jernigan, T.L., Lee, F.S., Casey, B.J., and the PING Consortium. (2016, April). *FAAH genotypic differences in frontolimbic circuitry and anxiety emerge during adolescence in human and mouse*. Poster presented at Social Affective Neuroscience Society, New York, NY.
- Callaghan, B., **Gee, D.G.**, Gabard-Durnam, L., Telzer, E., Humphreys, K., Goff, B., Shapiro, M., Flannery, J., Lumian, D., Tottenham, N. (2016, April). *Parental deprivation prematurely ends a sensitive period for amygdala*

buffering by parents: Long-term anxiety associations. Poster presented at Social Affective Neuroscience Society, New York, NY.

Gee, D.G., Fareri, D., Gabard-Durnam, L., Caldera, C., Goff, B., Monti, M., Jovanovic, T., Casey, B.J., Tottenham, N. (2016, April). *Safety signal learning as a novel mechanism for fear reduction during adolescence.* Poster presented at Cognitive Neuroscience Society, New York, NY.

Gee, D.G., Fareri, D., Gabard-Durnam, L., Caldera, C., Goff, B., Monti, M., Jovanovic, T., Casey, B.J., Tottenham, N. (2015, December). *Safety signal learning as a novel mechanism for fear reduction during adolescence.* Poster presented at the NIH High Risk High Reward Symposium, Bethesda, MD.

Gee, D.G., Goff, B., Gabard-Durnam, L., Caldera, C., Fareri, D., Lumian, D., Flannery, J., Tottenham, N. (2015, October). *Experimental manipulation of prefrontal cortex differentially affects amygdala reactivity following early-life stress.* Poster presented at Society for Neuroscience, Chicago, IL.

Silvers, J.A., Lumian, D.S., Gabard-Durnam, L., **Gee, D.G.,** Goff, B., Fareri, D.S., Caldera, C., Flannery, J., Telzer, E., Humphreys, K., Tottenham, N. (2015, October). *Effects of early life stress on neural mechanisms of fear learning.* Oral presentation at Society for Neuroscience, Chicago, IL.

Gabard-Durnam*, L., **Gee*, D.G.,** Goff, B., Flannery, J., Telzer, E., Humphreys, K., Lumian, D., Fareri, D.S., Caldera, C., Tottenham, N. (2015, October). *Stimulus-elicited connectivity influences future resting-state connectivity in development.* Oral presentation at Annual Brain Imaging Center Symposium, Mt. Sinai Icahn School of Medicine, New York, NY.

Gee, D.G., Fareri, D., Caldera, C., Goff, B., Gabard-Durnam, L., Monti, M., Jovanovic, T., Casey, B.J., Tottenham, N. (2015, September). *Safety signal learning as a novel mechanism for fear reduction during development.* Poster presented at Flux International Congress, Leiden, Netherlands.

Gee, D.G., Goff, B., Gabard-Durnam, L., Caldera, C., Fareri, D., Lumian, D., Flannery, J., Tottenham, N. (2015, May). *Experimental manipulation of prefrontal recruitment has differential effects on amygdala reactivity in children and adolescents.* Poster presented at Association for Psychological Science, New York, NY.

Callaghan, B.L., **Gee, D.G.,** Gabard-Durnam, L., Telzer, E., Humphreys, K., Goff, B., Shapiro, M., Flannery, J., Lumian, D., Fareri, D., Caldera, C., Tottenham, N. (2015, May). *Amygdala buffering following early parental deprivation in human children and adolescents.* Poster presented at Association for Psychological Science, New York, NY.

Tottenham, N., **Gee, D.G.,** Gabard-Durnam, L., Callaghan, B. (2015, May). *Maternal modulation of the human amygdala-mPFC circuit.* Oral presentation at Society for Biological Psychiatry, Toronto, Ontario.

Gee*, D.G., Gabard-Durnam*, L., Telzer, E.H., Humphreys, K.L., Goff, B., Shapiro, M., Flannery, J., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2015, April). *Parental buffering of human amygdala-prefrontal circuitry during childhood but not adolescence.* Poster presented at Anxiety and Depression Association of America, Miami, FL.

Gabard-Durnam*, L., **Gee*, D.G.,** Goff, B., Flannery, J., Telzer, E.H., Humphreys, K.L., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2014, November). *Hebbian-like mechanism for human amygdala-mPFC network development.* Oral presentation at New York Academy of Sciences, New York, NY.

Gee*, D.G., Gabard-Durnam*, L., Telzer, E.H., Humphreys, K.L., Goff, B., Shapiro, M., Flannery, J., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2014, November). *Maternal buffering of human amygdala-prefrontal circuitry specifically during childhood.* Poster presented at Society for Neuroscience, Washington, D.C.

- Gabard-Durnam*, L., **Gee*, D.G.**, Goff, B., Flannery, J., Telzer, E.H., Humphreys, K.L., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2014, November). *Hebbian-like mechanism for human amygdala-mPFC network development*. Oral presentation at Society for Neuroscience, Washington, D.C.
- Goff, B., Gabard-Durnam, L., **Gee, D.G.**, Flannery, J., Lumian, D.S., Fareri, D.S., Caldera, C.J., Tottenham, N. (2014, November). *Human chromosomal modification associated with early-life stress induced adolescent depression and nucleus accumbens hyporeactivity*. Oral presentation at Society for Neuroscience, Washington, D.C.
- Gee, D.G.**, Bearden, C.E., McEwen, S.C., Addington, J., Cadenhead, K.S., Cornblatt, B.A., McGlashan, T.H., Perkins, D.O., Seidman, L.J., Walker, E.F., Woods, S.W., Cannon, T.D. (2014, May). *Amygdala-prefrontal circuitry predicts recovery and conversion to psychosis among at-risk adolescents*. Poster presented at Association for Psychological Science, San Francisco, CA.
- Jann, K., **Gee, D.G.**, Kilroy, E., Schwab, S., Cannon, T.D., Wang, D.J. (2014, May). *Reliability of resting brain networks in BOLD and ASL fMRI across time and platforms*. Poster presented at International Society for Magnetic Resonance in Medicine, Milan, Italy.
- Gee, D.G.**, Bearden, C.E., McEwen, S.C., Addington, J., Goodyear, B., Cadenhead, K.S., Mirzakhani, H., Cornblatt, B.A., Olvet, D., McGlashan, T.H., Perkins, D.O., Belger, A., Seidman, L.J., Thermenos, H., Tsuang, M.T., Van Erp, T.G., Walker, E.F., Hamann, S., Woods, S.W., Constable, T., Cannon, T.D. (2014, April). *Amygdala-prefrontal circuitry differentially predicts recovery and conversion to psychosis among adolescents and young adults at clinical high risk for psychosis*. Poster presented at Cognitive Neuroscience Society, Boston, MA.
- Gee, D.G.**, Goff, B., Gabard-Durnam, L., Flannery, J., Tottenham, N. (2013, November). *Experimental manipulation of prefrontal recruitment has differential effects on amygdala reactivity in children and adolescents*. Poster presented at Society for Neuroscience, San Diego, CA.
- Flannery, J., Gabard-Durnam, L., **Gee, D.G.**, Humphreys, K.L., Goff, B., Lumian, D., Tottenham, N. (2013, November). *The impact of early life adversity on diurnal HPA axis function across development*. Poster presented at Society for Neuroscience, San Diego, CA.
- Goff, B., **Gee, D.G.**, Gabard-Durnam, L., Flannery, J., Telzer, E.H., Humphreys, K.L., Louie, J., Tottenham, N. (2013, November). *Developmental changes in amygdala-insula connectivity mediate normative age-related increases in trust appraisals*. Poster presented at Society for Neuroscience, San Diego, CA.
- Jann, K., **Gee, D.G.**, Kilroy, E., Cannon, T.D., Wang, D.J. (2013, September). *Reliability of Resting Brain Networks in BOLD and ASL fMRI across Time and Platforms*. Poster presented at International Conference on Basic and Clinical Multimodal Imaging, Geneva, Switzerland.
- Gee, D.G.**, Gabard-Durnam, L., Flannery, J., Goff, B., Humphreys, K., Telzer, E., Tottenham, N. (2013, July). *Early adversity alters the development of emotion regulation circuitry*. Poster presented at American Psychological Association, Honolulu, HI.
- Tottenham, N., **Gee, D.G.** (2013, May). *Developmental Shift in Amygdala-Medial Prefrontal Cortex Connectivity to Fearful Faces*. Oral presentation at Association for Psychological Science, Washington, D.C.
- Forsyth, J., McEwen, S., **Gee, D.G.**, Addington, J., Cadenhead, K., Cornblatt, B., Mathalon, D., McGlashan, T., Perkins, D., Seidman, L., Tsuang, M., Walker, E., Woods, S., Cannon, T.D. (2013, May). *Neural abnormalities during working memory predict conversion to psychosis in clinical high-risk youth: Preliminary analysis from North American Prodrome Longitudinal Study*. Poster presented at Society of Biological Psychiatry, San Francisco, CA.
- Tottenham, N., **Gee, D.G.** (2013, April). *Developmental Shift in Amygdala-mPFC Response to Fear Faces*. Oral presentation at Society for Research in Child Development, Seattle, WA.

- Gee, D.G.,** Goff, B., Gabard-Durnam, L., Flannery, J., Tottenham, N. (2013, April). *Sustained effects of cognitive load on amygdala reactivity among children and adolescents*. Poster presented at Cognitive Neuroscience Society, San Francisco, CA.
- Goff, B., **Gee, D.G.,** Telzer, E., Humphreys, K., Gabard-Durnam, L., Flannery, J., Tottenham, N. (2013, April). *Reduced nucleus accumbens reactivity and adolescent depression following early-life stress*. Poster presented at Cognitive Neuroscience Society, San Francisco, CA.
- Gabard-Durnam, L., Flannery, J., Goff, B., **Gee, D.G.,** Telzer, E., Humphreys, K., Tottenham, N. (2013, April). *Development of amygdala-cortical functional connectivity at rest*. Poster presented at Cognitive Neuroscience Society annual meeting, San Francisco, CA.
- Tottenham, N., **Gee, D.G.** (2012, November). *Human Amygdala and vmPFC Development Following Maternal Deprivation*. Oral presentation at International Society for Developmental Psychobiology, New Orleans, LA.
- Gee, D.G.,** Jacobson, S., Addington, J., Woods, S.W., Lieberman, M.D., Cannon, T.D. (2012, April). *Amygdala reactivity and its relationship with clinical course in adolescents at clinical high risk for psychosis*. Poster presented at Social and Affective Neuroscience Society, New York, NY.
- Gee, D.G.,** & Tottenham, N. (2011, November). *Developmental changes in functional connectivity of neural circuitry subserving emotion regulation*. Poster presented at Society for Neuroscience, Washington, D.C.
- Gee, D.G.,** Karlsgodt, K.H., Jimenez, A.M., Lesh, T.A., Kushan, L., Xu, A., Torre, J., van Erp, T.G.M., Lieberman, M.D., Bearden, C.E., Cannon, T.D. (2011, April). *Neural substrates of emotion processing in the psychosis prodrome*. Poster presented at International Congress on Schizophrenia Research, Colorado Springs, CO.
- Gee, D.G.,** Karlsgodt, K., Jimenez, A., Lesh, T., Kushan, L., Xu, A., Torre, J., van Erp, T., Lieberman, M., Bearden, C.E., Cannon, T.D. (2011, April). *Altered Age-Related Patterns of Amygdala-Prefrontal Circuitry in Adolescents at Risk for Psychosis*. Poster presented at International Prodromal Research Network, Colorado Springs, CO.
- Kim, M.J., **Gee, D.G.,** Loucks, R.A., Davis, F.C., Whalen, P.J. (2010, November). *Anxiety dissociates dorsal and ventral medial prefrontal cortex functional connectivity with the amygdala at rest*. Oral presentation at "Subcortical-Prefrontal Interactions in Health and Disease" symposium, Society for Neuroscience, San Diego, CA.
- Kim, M.J., **Gee, D.G.,** Loucks, R.A., Whalen, P.J. (2010, April). *Anxiety modulates resting state functional connectivity of the amygdala and the medial prefrontal cortex*. Poster presented at Cognitive Neuroscience Society, Montreal, Canada.
- Gee, D.G.,** Biswal, B.B., Kelly, A.M.C., Shehzad, Z., Uddin, L.Q., Stark, D.E., Margulies, D.S., Klein, D.F., Banich, M.T., Castellanos, F.X., Milham, M.P. (2009, June). *Low frequency fluctuations reveal integrated and segregated cerebral processing*. Poster presented at Advances in Resting-State fMRI (satellite meeting of Human Brain Mapping), Stanford University, Stanford, CA.
- Gee, D.G.,** Stark, D.E., Margulies, D.S., Shehzad, Z., Kelly, A.M.C., Uddin, L.Q., Banich, M.T., Castellanos, F.X., Milham, M.P. (2008, November). *A resting-state functional connectivity approach to interhemispheric interaction*. Poster presented at Society for Neuroscience, Washington, D.C.

TEACHING EXPERIENCE

Course Instructor, Affective Bases of Behavior (PSYC 805)
Department of Psychology, Yale University

Spring 2018

Lecturer, Foundations of Neuroscience: Biological Bases of Human Behavior (PSYC 530)
Department of Psychology, Yale University

Fall 2017

Guest Lecturer, Developmental Neuroscience of Emotion (Undergraduate Level) Department of Psychological & Brain Sciences, Dartmouth College	Spring 2017
Course Instructor, Statistics in Psychological Science (PSYC 200) Department of Psychology, Yale University	Spring 2017, Spring 2018
Course Instructor, Teaching in Psychology (PSYC 699) Department of Psychology, Yale University	Spring 2017, Spring 2018
Faculty Coordinator, Current Works in Clinical Psychology & Neuroscience (PSYC 720) Department of Psychology, Yale University	Fall 2016, Spring 2017
Course Instructor, Research Topics in Clinical Affective Neuroscience & Development (PSYC 754) Department of Psychology, Yale University	Fall 2016 - Present
Lecturer, Developmental Neuroscience Series (Psychiatry fellows) Weill Cornell Medical College	Spring 2016
Lecturer and Lab Instructor, Brain and Mind (Medical students) Weill Cornell Medical College	Fall 2015
Guest Lecturer, Developmental Neurobiology of Fear (Undergraduate Level; 188A) Department of Psychology, UCLA	Spring 2014
Guest Lecturer, Foundations of Clinical Psychology Laboratory Course (Graduate Level; 271B) Department of Psychology, UCLA	Winter 2014

PROFESSIONAL SERVICE (SELECTED)

Ad Hoc Reviewer: *American Journal of Psychiatry*; *Biological Psychiatry*; *Biological Psychiatry: Cognitive Neuroscience and Neuroimaging*; *Brain Connectivity*; *Brain and Neuroscience Advances*; *Brain Imaging and Behavior*; *Cerebral Cortex*; *Chronic Stress*; *Clinical Psychological Science*; *Cognitive Therapy and Research*; *Depression and Anxiety*; *Developmental Cognitive Neuroscience*; *Developmental Science*; *Emotion*; *Hormones and Behavior*; *Human Brain Mapping*; *International Journal of Developmental Neuroscience*; *JAMA Pediatrics*; *JAMA Psychiatry*; *Journal of Abnormal Psychology*; *Journal of Adolescence*; *Journal of Affective Disorders*; *Journal of the American Academy of Child and Adolescent Psychiatry*; *Journal of Child and Adolescent Psychopharmacology*; *Journal of Child Psychology and Psychiatry*; *Journal of Clinical Child and Adolescent Psychology*; *Journal of Clinical Psychiatry*; *Journal of Cognitive Neuroscience*; *Journal of Experimental Psychology: General*; *Journal of Neuroscience*; *Journal of Visualized Experiments*; *Molecular Psychiatry*; *Neurobiology of Stress*; *NeuroImage*; *NeuroImage: Clinical*; *Neuropsychopharmacology*; *NeuroReport*; *Perspectives on Psychological Science*; *PLOS ONE*; *Proceedings of the National Academy of Science*; *Psychiatry Research: Neuroimaging*; *Psychoneuroendocrinology*; *Revista Brasileira de Psiquiatria*; *Schizophrenia Bulletin*; *Schizophrenia Research*; *Social, Cognitive, and Affective Neuroscience*; *Social Neuroscience*; *Translational Psychiatry*

Program Committee, Society for Research in Psychopathology annual meeting (2018)

Program Committee, Social and Affective Neuroscience Society annual meeting (2018)

Graduate Program Advisory Committee, Yale Department of Psychology (2017-2018)

Conference Reviewer: Anxiety and Depression Association of America (2015, 2016), Society for Research in Child Development (2017)

Co-Director, Sackler Summer Institute in Developmental Psychobiology at Weill Cornell Medical College (2015)